Business Zoning Review

For Zoning Compliance Certificate

Before a Zoning Compliance Certificate is issued, all required pre-approvals by other Borough agencies i.e. fire, health, police, etc., must be obtained.

C	One (1) copy of the following must be submitted to the Zoning Official
1.	Completed Application
2.	Photos front, sides, & rear
3.	Site Survey/Plan may not be more than five (5) years old and scaled
	to 1:20. This must show all signage, parking etc
4.	Building Plans/Layout showing all tenant spaces & uses etc

All signage requires a separate zoning permit application to be filed and may require a construction permit. Please follow the sign regulations as per the Westwood Zoning Ordinances for the zone which you are in.

The **Office Copy** of this application **MUST BE SIGNED** by the Health Department, Sharon Blehl, **Only**, before the Building Department can accept your application.

Sharon Blehl

Date

Health Department Inspections ARE REQUIRED before Opening

Food Related Services
Pet Shops
Nursery Schools
Nursing Home Facilities

PLEASE COMPLETE APPLICATION ON REVERSE SIDE

Site Address				Block	Lot	Zone		
Type of Application	☐ Char	ge in Tenant		Change in Own	ership			
Property Owners Information:								
Name								
Address								
Phone # Fax #						NI h		
Previous Business Name								
Previous Business Name Previous Business Use								
Property Owners Permission								
By signing this application I am giving you permission to visit my property to view and verify all								
existing conditions if it is needed.								
_		ż		_				
Signature of Property			D	ate:				
Include 1 cars of the following items								
Include 1 copy of the following items ☐ Photo ☐ Interior Bldg plan, neat to scale ☐ Sealed/Engineered Site Plan w/ parking layout(under 5 yrs)								
Check made payable to "Borough of Westwood" in the amount of Two Hundred dollars (\$200.00)								
Date	Check			Batch #				
I certify that the statements made herein are true:								
			•	Landlor		,		
Any incorrect or falsified information will render this application void and any approvals based on								
it.								
Proposed New Tenant / Owner and Use Information								
Registered / Legal /	Corp. Name							
Business (d b a) Na						**		
Sq Footage being L						y · <u>u -</u>		
Business Owners N	······							
Business Owners H				**************************************	, ,			
Business Owners To	ele.# & Fax							
Hours of Operation	to be			<i>M</i> .		***************************************		
Days of Operation will be								
Number of Employees will be								
# of Designated Par								
Business Use		Attach a detailed	l. tvo	ed description	n of your	proposed use		
Building Improvem	ents→	Description of prop		M1				
Signage to be instal		Separate applicatio						
Outside Storage		Not Allowed in any				- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
* * * * For Zoning Official's Use Only * * * * *								
Any missing information will render this application denied and another fee will be assessed								
				**************************************		.,,		